

## UB-04 PAPER CLAIM FORM FREQUENTLY ASKED QUESTIONS

Question	Answer																
1. When can I begin to use the new UB-04 claim form?	The new UB-04 claim form is currently being accepted by Idaho Medicaid.																
2. Can I still use the UB-92 claim form and for how long?	The UB-92 and new UB-04 versions of the UB claim form will be accepted for processing until September 30, 2007. As of October 1, 2007 only the UB-04 claim form will be accepted. Providers should be transitioning to the new UB-04 claim form now, in anticipation of Medicaid no longer accepting the UB-92 claim form in the future.																
3. How do I complete the new UB-04 claim form?	Instructions for completing the new UB-04 claim form that are specific to Idaho Medicaid claim submissions and a sample of the claim form are posted on the Health and Welfare website listed under Medicaid Providers at: <b><a href="http://www.healthandwelfare.idaho.gov/site/3348/default.aspx">http://www.healthandwelfare.idaho.gov/site/3348/default.aspx</a></b>																
4. Do I continue to bill total charges with revenue code 001 in the body of the claim?	No, Line 23 is specifically designed for capturing the total charges. If revenue code 001 and total charges are in fields <b>1</b> through <b>22</b> they will be processed as an additional revenue code resulting in possible claim denials.																
5. If I need to bill with referring provider information, where should the information be entered?	Enter the Idaho Medicaid referral provider number in field <b>78</b> , on the fourth (last) box. <div><table><tr><td>78 OTHER</td><td>NPI</td><td>QUAL</td><td>802222200</td></tr><tr><td colspan="2">LAST</td><td colspan="2">FIRST</td></tr><tr><td>79 OTHER</td><td>NPI</td><td>QUAL</td><td>803333300</td></tr><tr><td colspan="2">LAST</td><td colspan="2">FIRST</td></tr></table></div>	78 OTHER	NPI	QUAL	802222200	LAST		FIRST		79 OTHER	NPI	QUAL	803333300	LAST		FIRST	
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6. What is a qualifier?	<ul style="list-style-type: none"><li>• A qualifier is a 2-character modifier that identifies the information that follows it.</li><li>• Qualifiers are not required on the UB-04 claim form.</li></ul>																																																			
7. What other fields need special attention when billing Idaho Medicaid on the new UB-04 claim form?	<p>Since both the participant’s first and last name is verified in claims processing, please enter the last name in field <b>8a</b> and the first name in field <b>8b</b>.</p> <table><tr><td>8 PATIENT NAME</td><td>a</td><td>SMITH</td></tr><tr><td>b</td><td colspan="2">DAVID</td></tr></table> <p>The fields for covered, non-covered, co-insurance and lifetime reserve days have been eliminated. These days are now indicated in fields <b>30</b> through <b>41</b> with the appropriate value codes.</p> <table><tr><td></td><td>39 CODE</td><td>VALUE CODES AMOUNT</td><td></td><td>40 CODE</td><td>VALUE CODES AMOUNT</td><td></td><td>41 CODE</td><td>VALUE CODES AMOUNT</td></tr><tr><td>a</td><td>80</td><td>17</td><td>:</td><td></td><td></td><td>:</td><td></td><td></td></tr><tr><td>b</td><td></td><td></td><td>:</td><td></td><td></td><td>:</td><td></td><td></td></tr><tr><td>c</td><td></td><td></td><td>:</td><td></td><td></td><td>:</td><td></td><td></td></tr><tr><td>d</td><td></td><td></td><td>:</td><td></td><td></td><td>:</td><td></td><td></td></tr></table>	8 PATIENT NAME	a	SMITH	b	DAVID			39 CODE	VALUE CODES AMOUNT		40 CODE	VALUE CODES AMOUNT		41 CODE	VALUE CODES AMOUNT	a	80	17	:			:			b			:			:			c			:			:			d			:			:		
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\* It is important to note that the Idaho Medicaid provider number will continue to be required on all UB-04 claim forms.